

"WHO TO CALL"

FREQUENTLY CALLED NUMBERS

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| Program Review Division (PRD) Prior Authorization Inquiry Dental/Special Services Medical Supplier (87) Special In Home Services: OT, PT, ST | 1-800-622-0276 FAX# 517-335-0075 | Michigan Enrolls Medicaid Health Plan Choices MI Child | 1-888-367-6557 1-888-988-6300 |
| Family Phone Line | 1-800-359-3722 | MI Enrolls/CSHCS | 1-877-274-2737 |
| J & B Medical | 1-800-737-0045 | Magellan (DCH Pharmacy Benefits Manager) Beneficiary Helpline (family only) Pharmacy Claim Assistance (pharmacy only) Clinical Call Center for PA (prescribing physician) Pharmacy Provider Enrollment and Inquiries | 1-877-681-7540 1-877-624-5204 1-877-864-9014 1-888-868-9219 |
| Provider Inquiry Email: providersupport@michigan.gov | 1-800-292-2550 | Covisint Help Desk (EZ Link) | 1-866-373-0878 |
| Beneficiary Helpline | 1-800-642-3195 | | |

Lonnie Barnett, Director **Children's Special Health Care Services Division**

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| Children with Special Needs Fund (CSN) Rebecca Start, Manager Provides services and equipment to children with special health care needs that no other resource provides. | Customer Support Section (CSS) Jim Beaver, Acting Manager Initial medical eligibility process: Application and enrollment process: Income Review/Payment Agreement, authorize providers, address changes. Medical and financial renewal process. | Family Center for Children and Youth With Special Health Care Needs (FC) Candi Bush, Director Provide for consumer participation and consultation to the CSHCS program. Consumer liaison with other agencies. |
| Policy & Program Development Section (PPD) Karla McCandless, Manager Initiates, implements and interprets CSHCS policy; Provides interpretation of Medicaid policies, staff appeals/hearings. Support LHDs and families re: Transition; Collects and analyzes data; Trouble-shoots for extra-ordinary billing problems; Performs CSHCS contract management. Determines Respite and Hospice eligibility. | Quality & Program Services Section (QPS) Rebecca Start, Manager Quality Improvement planning, implementation, and monitoring for LHDs; consumer satisfaction surveys. LHD liaison, insurance premium payment program, and transportation. | |

| ISSUE/TOPIC | CONTACT PERSON & PHONE NUMBER | INFORMATION TO HAVE IN FRONT OF YOU | COMMENTS |
|---|---|--|--|
| Accreditation | Courtney Pendleton 517-241-7189 | | |
| Annual Narrative Reports - LHD | Courtney Adams 517-241-7182 | | |
| Billing Problems/ Providers | PROVIDER INQUIRY 1-800-292-2550 | Provider name and address, NPI number, provider type, and DOS. Client name, ID number, remittance advice. | Direct provider to contact Provider Inquiry for assistance. |
| Billing Problems/Client | Beneficiary Helpline 1-800-642-3195 | | Before contacting anyone determine if: |
| Billing problems (after Provider Inquiry has been used and problem still not resolved). | Pat McNutt 517-241-8202 | Same as above. | 1) Provider needs to be authorized. 2) If so have them rebill after completed. 3) Make sure insurance is correct. |
| Children's Multidisciplinary Specialty (CMS) Clinics | Karla McCandless 517-241-7511 | Questions about what clinics are approved, application process, re-approval of clinics, CMS policy | |
| Children with Special Needs Fund (CSN Fund) | Nanya Chiejne 517-335-9408 CSN Fund 517-241-7420 | Client name, ID number, information on requested item, date request was submitted, other information related to request. | Questions concerning CSN Fund requests, status inquiries or other comments or concerns should be directed to this office. |
| Client record changes: adds, deletes, other changes, status of application | Analyst for the Appropriate County CSS | Copies of what was sent to make the changes, client name, client ID number, information on care needs. | Be prepared to discuss: what information was submitted on NOA, when it was submitted, and any response you have seen from the Analyst. |
| Cochlear Implants | Program Review Division 1-800-622-0276 | Client name, ID number, provider number, and procedure code(s) | |
| Complaints, Concerns with Program | Lonnie Barnett, Director CSHCS Division 517-241-7186 | Client and family demographic information, phone numbers, particular people to contact regarding the issues. | Be prepared to discuss what you have done to resolve the problem, who you have talked to, and the current status of the situation. |
| Comprehensive Planning, Budgeting, and Contracting (CPBC) Agreement (LHDs) | Courtney Adams 517-241-7182 | | |
| Dental Care & Orthodontia | Office of Medical Affairs (517) 335-5181 Dietrich Roloff, M.D. Nina Mattarella, M.D. 517-335-8995 | Client name, ID number, information on care needs, eligible CSHCS diagnosis, provider suggested, and date of service. | Note orthodontia is not covered for all diagnoses, only those where orthognathic surgery is required, or for limited diagnoses. |
| Departmental Reviews/ Administrative Hearings | Family Phone Line 1-800-359-3722 | Details of specific situation and why decision should be reviewed. | Note type of eligibility: V only, XIX only, dually eligible (V/XIX), in the process of applying; type of coverage-FFS, MHP. |

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| Diagnostic Evaluation: | Regional Nurse Consultant for County | Specific questions and issues to be discussed. | |
| Duplicate Client ID Numbers | Analyst for the Appropriate County CSS | Client name, ID numbers, Client birth date. | |
| Evaluation of birth defects, genetic syndromes, genetic counseling | <i>Janice Bach</i> MDCH Community Living, Children and Families; Hereditary Diseases 517-335-8887 | Indications for referral to genetic centers for counseling or other testing. | Have you discussed the situation with the genetics counselor at the center? Note: Genetic Centers are not a part of CSHCS nor Medicaid. E-mail birth defect questions to: BDRfollowup@michigan.gov |
| Expenditure Reports (Client Specific) | <i>Amy Chapko</i> PPD 517-241-8998 | Client name, ID numbers, Client birth date. | |
| Family Center for CYSHCN Family Referral | Family Phone Line 1-800-359-3722 | | Family Phone Line is for families only, do not refer providers to this number. |
| Forms- Appendix D in Guidance Manual | FAX REQUEST FOR HARD COPIES TO: Joshua Hall 517-241-1164 or mail: MDCH <i>Attn: Joshua Hall</i> 320 S. Walnut St. Lansing, MI 48913 DOWNLOADABLE ELECTRONIC FORMS ARE AVAILABLE ON THE CSHCS WEBSITE (certain forms available only via LHD Forms Download in the CSHCS database) | Using letterhead, include a contact name and phone number, the delivery address for order, list the form name and number (i.e., MSA-4114) and amount needed. | |
| Formula, Dietary Prior Authorization | Michigan Peer Review Organization (MPRO) 800-727-7223 22670 Haggerty Rd., Ste. 100 Farmington Hills, MI 48335-2611 | Client name, ID number, diagnosis, procedure code(s), provider name and phone number. Current ht/wt., alternatives tried. | Prior authorization of dietary formula (applies to applicable procedure codes requiring prior authorization noted on the MDCH Medical Supplier/DME/Prosthetics and Orthotics Database on the MDCH). |
| Health Savings Accounts/Health Reimbursement Accounts/Flexible Spending Accounts | <i>Amy Chapko</i> , PPD 517-241-8998 | | |

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| Hearing Eligibility | <i>Lorie Lang, MA, CCC-A</i> Audiology Consultant MDCH Medical Services Administration Email: LangL1@michigan.gov | Client name, ID number, procedure code(s), provider ID number. | May also be called upon to assist in resolution of questions regarding eligibility determinations for hearing. |
| Hospice | <i>Matt Richardson, R.N.</i> QPS 517-335-8994 | What is needed and how does it reflect the need for a nurse to provide the care. | |
| Insurance Premium Payment Benefit | <i>Amy Chapko,</i> PPD 517-241-8998 | Client name, ID number, and information on client/family service needs. | Premium payment benefit includes COBRA, private insurance, Medicare Part B, and Medicare Part D. |
| Medical Eligibility <i>Clinical Questions</i> | <i>Nina Mattarella, M.D.</i> 517-335-8995 Office of Medical Affairs 517-335-5181 | Questions about covered diagnosis are directed to medical consultants. | |
| Medical Eligibility <i>Policy & Procedure</i> | <i>Jim Beaver</i> CSS 517-335-8630 | General clarification on policy & procedure of eligibility enrollment process. | Direct client-specific questions to Analyst |
| Out-of-State Care | Regional Nurse Consultant | | |
| Payment Agreements | <i>Jim Beaver</i> CSS 517-335-8630 | General clarification and financial information used to make decisions. | Direct client-specific questions to Analyst |
| Payment Agreements: Client Specific | <i>Analyst for the appropriate County</i> CSS | Client Name and ID number, coverage year(s) and relevant information | Questions concerning payment agreement audits, bills or refunds. Request for how much CSHCS has spent on a specific child goes to Pat McNutt at 517-241-8202. |
| Manual payments, field clinics, diagnostics, respite. | Provider Enrollment & Special Payments Section 517-335-5478 | Date bill was submitted to the system. | Note: providers are advised it will take 6-8 weeks to process manual payments. |
| Pharmacy Medicare Part D Problems and co-pay reimbursement | <i>Pat McNutt</i> PPD 517-241-8202 | Standard client info and Medicare Part D information available. | |
| Policy Questions | <i>Karla McCandless</i> PPD 517-241-7511 | | |
| Private Duty Nursing | Program Review Division <i>Debbie Long, Analyst</i> 517-335-5227 | Beneficiary name, ID number, information on nursing care needs. | Important to distinguish what are the nursing services being requested. |
| Prior Authorization: DME/supplies, hearing aids, dental and any service/equipment needing PA, checks on status of the PA. | Program Review Division 1-800-622-0276 | Provider name and address, date of service, procedure code(s) or other identifying information. | Note: PRD has 15 days to respond to PAs and may request additional information from providers if necessary. |

| ISSUE/TOPIC | CONTACT PERSON & PHONE NUMBER | INFORMATION TO HAVE IN FRONT OF YOU | COMMENTS |
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| Prior Authorization: <i>Emergent or Urgent Provider Complaints; PA Request (verbal)</i> | Program Review Division 1-800-622-0276 | As above, plus description of provider complaint or request. | Urgent is when there may be a detrimental effect if not provided soon. Emergent is when death or extreme detrimental effect if not provided immediately. |
| Prior Authorization: Transplant initial requests, (in and out-of-state) | <i>Marla McArdle</i> CSS 517-335-8983 FAX# 517-335-9491 | Client name, ID number, information on care needs, location, and procedure recommended. Referring physician may fax information. | All out of state care must be prior approved. Emergency care situations should contact the Office of Medical Affairs as soon as possible. Office of Medical Affairs 517-335-5181 |
| Prior Authorization: Genetics testing out-of-state lab. | <i>Rachel Brown</i> Program Review Division 517-335-5190 FAX# 517-335-0075 | Client name, ID number, information on care needs, location, and procedure recommended. Referring physician may fax information. | All out of state care must be prior approved. Emergency care situations should contact the Office of Medical Affairs as soon as possible. Office of Medical Affairs 517-335-5181 |
| Prior Authorization: <i>All other calls and consumer inquiries.</i> | <i>Program Review Division</i> 1-800-622-0276 | As above, with specific concerns regarding situation. | |
| Quarterly Care Coordination/Case Management Logs | Courtney Adams 517-241-7182 | | |
| Respite Care | <i>Matt Richardson, R.N.</i> QPS 517-335-8994 | What is needed and how does it reflect the need for a nurse to provide the care. | Respite is authorized based on eligibility periods. |
| Single Sign On (SSO) Password Reset | Michigan DTMB Client Service Center 1-800-968-2644 | Your SSO User ID and e-mail address | To re-set your SSO password, contact the DTMB Client Service Center at 1-800-968-2644 (press 0, 1, 4). Request a password re-set for the Single Sign On (SSO) portal. You will need your SSO User ID and e-mail address. |
| Transition Policy and Resources | PPD 517-241-8385 | Transition materials. | |
| Transportation Assistance requests & status of payment | <i>Courtney Pendleton</i> 517-241-7189 | Date invoice submitted, date of service, clients name, ID number, LHD authorization letter, and information regarding trip | Advise parents it is taking 6-8 weeks to process payments for travel. |
| Transportation, Medical (Emergent) | <i>Courtney Pendleton</i> 517-241-7189 | No prior authorization required in emergency or life threatening situations. | Refers to ambulance, fixed wing, helicopter services. Medical documentation required when submitting invoice. |
| Urgent TPL Insurance Changes | <i>Amy Chapko</i> PPD 517-241-8998 | Client name, ID number, insurance information, name of insurance carrier and date insurance was added or terminated. | For access to care issues only. |

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| <u>Children's Special Health Care Services</u> <u>Lonnie Barnett, Director</u> Executive Secretary: Laura Kach | 517-335-5008 517-241-7186 | BarnettL@michigan.gov |
| <u>Children with Special Needs Fund</u> Nanya Chiejine | 517-335-9408 | Chiejinen@michigan.gov |
| <u>Customer Support Section</u> Jim Beaver, Acting Section Manager Secretary: Marla McArdle | 517-335-8630 517-335-8986 | BeaverJ@michigan.gov |
| <u>Region 1</u> Sandy Lane, Supervisor | 517-335-8730 | Lanes1@michigan.gov |
| <u>Region 2</u> Vickie Price, Acting Supervisor | 517-335-8992 | PriceV@michigan.gov |
| <u>Family Center</u> Candi Bush, Director | 517-241-7197 | BushC9@michigan.gov |
| <u>Insurance Specialist</u> Amy Chapko | 517-241-8998 | ChapkoA@michigan.gov |
| <u>Nurse Consultants</u> Matt Richardson, R.N., CPNA | 517-335-8994 | RichardsonM@michigan.gov |
| <u>Policy & Program Development Section</u> Karla McCandless, Section Manager Secretary: Julie Kessler | 517-241-7511 517-241-8207 | McCandlessK@michigan.gov |
| <u>Quality & Program Services Section</u> Rebecca Start, Section Manager Secretary: Anita Wilson | 517-241-8869 517-241-8996 | StartR@michigan.gov |
| <u>Reimbursement (extraordinary situation) Specialist</u> Pat McNutt | 517-241-8202 | McNuttP1@michigan.gov |
| <u>Transportation</u> Courtney Pendleton | 517-241-7189 | PendletonC@michigan.gov |
| <u>Appeals</u> Family Phone Line | 1-800-359-3722 | |

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| Medical Services Administration, Office of Medical Affairs (*available as medical consultants to CSHCS) | | |
| Jane Turner, M.D. | 517-373-7335 | TurnerJ1@michigan.gov |
| Nina Mattarella, M.D, Ph.D. | 517-335-8995 | Mattarella@michigan.gov |
| Dietrich Roloff, M.D. | 517-335-8234 | RoloffD@michigan.gov |

Address and FAX Numbers

CSHCS

Lewis Cass Building- 6th Floor
320 S. Walnut Street
Lansing, MI 48913

FAX: 517-241-8970

(Use for Director, PPD, QPS and Family Center for CYSHCN)

FAX NUMBERS:

517-335-9491
517-241-8970
517-335-0075
517-335-8055

CSS Medical Reports, Applications/IRPAs, Transplant Request (in-state & out-of-state)
Administrative Matters
Program Review Division, Prior Authorization Requests
CSN Fund

CSHCS Customer Support Section (CSS)

Lewis Cass Building – 6th Floor
320 S. Walnut Street
PO Box 30734
Lansing, MI 48909

CHILDREN'S MULTIDISCIPLINARY SPECIALTY CLINICS

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| <p>WMed/Bronson Methodist Hospital Marlene Pryson, Clinic Coordinator 1000 Oakland Drive Kalamazoo, MI 49008 (269) 337-6437 Fax: (269)-337-6427</p> <p>Lori Campbell – Contracts 269-341-8974</p> <p>Dorothy Bennett – Administrative (269)337-6313</p> <p>Cardiology, Cleft Lip/Palate/Facial, Cystic Fibrosis, Diabetes, Endocrinology, Hematology/Oncology, Hemophilia, Multiple Handicap/Disability/Chronic Disease, Sickle Cell, Myelodysplasia/Spina Bifida and Pulmonary/Severe Asthma</p> | <p>Covenant Medical Center/Health Care Jackie Tinnin, Director 1447 N. Harrison Saginaw, MI 48602 (989) 583-5190</p> <p>Kelly Weiss, Coordinator (989)583-5190</p> <p>Diabetes and Endocrinology</p> | <p>E.W. Sparrow Hospital Jessica Yauch, Contract Administration Jessica.yauch@sparrow.org 1200 E. Michigan Avenue Lansing, MI 48909 (517) 364-6209</p> <p>Apnea, Cleft Lip/Palate/Facial and Myelodysplasia/Spina Bifida</p> |
| <p>Helen DeVos Children's Hospital Harmony Van Valkenberg, Director Harmony.vanvalkenberg@spectrumhealth.org 100 Michigan Street NE, MC-38 Grand Rapids, MI 49503 (616) 486-2049</p> <p>Cleft Lip/Palate/Facial, Cystic Fibrosis, Hematology/Oncology, Hemophilia, Lead Toxicity, Sickle Cell Disease</p> | <p>Hurley Children's Clinic Annett Napier, Service Line Administrator 1 Hurley Plaza Flint, MI 48503 (810) 262-6113</p> <p>Bill McGregor – Contracts Phone 810-262-9905</p> <p>Apnea, Cleft Lip/Palate/Facial, Cystic Fibrosis and Hemophilia</p> | <p>Marquette General-A Duke Lifepoint Hospital Elaine Taylor, RN – Clinic Manager (906) 225-3141 580 W. College Avenue Marquette, MI 49855 General Info: (906) 225-4777 Fax: (906)-225-4830</p> <p>Cardiology, Cleft Lip/Palate/Facial, Hematology/Oncology, Hemophilia, Multiple Handicap/Chronic Disease, Neurology, Neuromuscular/Spina Bifida, Diabetes & Genetics</p> |
| <p>Mary Free Bed Hospital Connie Brown-Olds, Clinic Manager 235 Wealthy Street SE Grand Rapids, MI 49503 (616) 356-1900 Fax: (616)493-9639</p> <p>Randy DeNeff, Financial Officer Randy.deneff@maryfreebed.com (616)242-0300</p> <p>Amputee/Limb Deficiency, Multiple Handicap/Chronic Disease and Myelodysplasia/Spina Bifida</p> | <p>Oakwood Center for Exceptional Families Susan Young, M.D., Clinic Director Tammy Morris, Clinic Program Manager 18501 Rotunda Drive Dearborn, MI 48124 (313) 996-1969 Fax: (313) 996-1965</p> <p>Apnea and Multiple Handicap/Chronic Disease Send copy of contract to Gregory Witbeck</p> | <p>William Beaumont Hospital Gretchen Hofmann, Practice Manager 3577 West 13 Mile Road Suite 206 Royal Oak, MI 48073 (248) 898-0181 Fax: (248)-551-7561</p> <p>Jacqueline Kirejczyk, Contract and Enrollment (248)577-3445</p> <p>Cleft Lip/Palate/Facial</p> |
| <p>Michigan State University Pediatrics and Human Development Lisa Dileria, Clinic Manager 1355 Bogue Street B240 Life Sciences East Lansing, MI 48824-1317 (517)353-5042 Lisa.Dileria@hc.msu.edu</p> <p>Karen Ross – Contracts (517)353-8887 Julie Lowman – Finance (517)355-7255</p> <p>Chronic Illness, Cystic Fibrosis, Diabetes, Endocrinology, Genetics, Hematology, Hemophilia, Immunology/ Rheumatology and Pulmonary/Severe Asthma, Medical Home Model</p> | <p>University of MI Medical Center Ilene G. Phillips, Associate Director 1500 East Medical Center Drive Ann Arbor, MI 48109-0244 (734) 764-2092 Hosp. Pager – X8606</p> <p>AIDS, Cleft Lip/Palate/Facial, Chronic Illness, Diabetes, Gastroenterology/Nutritional Deficiencies, Hematology/Oncology, Hemophilia, Metabolic Disease and Pulmonary/Severe Asthma, Weight Management</p> | |

CSHCS Local Advisory Council (CLAC)

This committee was formed in 2003 by the CSHCS Director. It is comprised solely of staff members from local health departments. The members represent various geographic areas of the state, as well as rural, urban, small and large. This committee meets every other month via teleconference.

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| Chris Buczek Kent County Health Department (616) 632-7055 Chris.buczek@kentcountymi.gov | Margaret Sherlund Oakland County Health Division (248) 858-0726 sherlundm@oakgov.com |
| Janine Chittenden Ottawa County Health Department (616) 844-2399 jchittenden@miottawa.org | Beverly Pyles Midland County Health Department (989) 832-6629 bpyles@co.midland.mi.us |
| Melanie Dunsmore St. Clair County Health Department (810) 987-6102 mdunsmore@hd.stclaircounty.org | Peggy Taylor Jackson County Health Department (517) 788-4422 ptaylor@co.jackson.mi.us |
| Becky Johnson-Himes Central MI DHD (231) 832-5532 ext. 8512 lgelinas@dhd10.org | Roseanne Terryn District Health Department #10 (231) 316-8566 rterryn@dhd10.org |
| Bridget Huss Monroe County Health Department (734) 240-7821 Bridget_Huss@monroemi.org | Joyce Ziegler Dickinson-Iron Health Department (906) 265-4156 jziegler@hline.org |
| Mary Martinchek Northwest Michigan Community Health (231) 347-5634 m.martinchek@nwhealth.org | |

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